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SEP 28 2001

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0010/PTO  
Rev. 6/95U.S. Department of Commerce  
Patent and Trademark Office

Attorney Docket Number

P/63000

# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Declaration Submitted with Initial Filing     Declaration Submitted after Initial Filing

First Named Inventor

MULLER, JORG-MARTHA

COMPLETE IF KNOWN

Application Number

09/886,944

Filing Date

JUNE 21, 2001

Group Art Unit

Examiner Name

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## DEVICE AND METHOD FOR PROCESSING FREQUENCY SIGNALS

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY)

JUNE 21, 2001

as United States Application Number or PCT International

Application Number

09/886,944

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (e) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
P.10030583.0	DE	06-21-2000 June 21, 2000	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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## DECLARATION

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I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s), or §385(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name _____ OR <input checked="" type="checkbox"/> List attorney(s) and/or agent(s) name and registration number below:	<input type="checkbox"/> Customer Number or label _____		
Name	Registration Number	Name	Registration Number
David B. Kirschstein, Esq. Alan Israel, Esq. Martin W. Schiffmiller, Esq.	17,244 27,564 30,421		

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:  Customer Number \_\_\_\_\_ OR  Fill in correspondence address below

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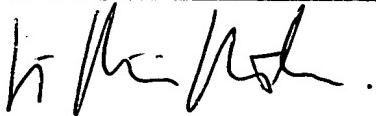
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:  A petition has been filed for this unsigned inventor

Given Name	Jorg-Martin	Middle Initial		Family Name	MULLER	Suffix e.g. Jr.	
Inventor's Signature					Date	25 June 2001	

Residence: City	Stuttgart	State	Country	DE GERMANY	Citizenship	DE
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Additional inventors are being named on supplemental sheet(s) attached hereto

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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Holger	Middle Initial	Family Name	HELMKE		Suffix e.g. Jr.		
Inventor's Signature	<i>Holger Helmke</i>				Date	25 June 2001		
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial	Family Name			Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City		State	Country				Citizenship	
Post Office Address								
Post Office Address								
City		State	Zip		Country			Applicant Authority
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name		Middle Initial	Family Name			Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City		State	Country				Citizenship	
Post Office Address								
Post Office Address								
City		State	Zip		Country			Applicant Authority
Additional inventors are being named on supplemental sheet(s) attached hereto				<input type="checkbox"/>				